

# CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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TOTAL IND.	/					
TOTAL DEP.	8	↔		↔		↔
TOTAL CLAIMS	9	████████	████████	████████	████████	████████

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS	9	████████	████████	████████	████████	████████

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS